

SHA 092. Impact of a cardiac diabetic nurse in reducing the incidence of hypoglycaemic events in cardiac patient with type 2 diabetes
Hisham Eid, Amany Fatouh, Musab Ghidan, Bassam Bdeir, Tara Conboy

King Abdulaziz Medical City-Cardiac Center, Riyadh, Saudi Arabia
E-mail address: eidh@ngha.med.sa (H. Eid)

Introduction: Hypoglycaemia is a potential lethal complication of hypoglycaemic medications for patients with Diabetes Mellitus (DM), as was demonstrated in the Diabetes Control and Complication Trial (DCCT). United Kingdom Prospective Diabetes Study (UKPDS) reported an annual incidence of major hypoglycaemic events of 2.3% in that receiving insulin therapy.

Objective: To evaluate the effectiveness of the Cardiac Diabetic Nurse in Reducing the Incidence of Hypoglycaemic Events in Cardiac Patients with Type 2 DM at KACC.

Methodology: This prospective study will implement two interventions. The first will focus on an intensive educational strategy for approximately 100 cardiac nurses, and facilitate delivery of the latest evidence based guidelines over a 6-week period. A pre-test evaluation will be obtained from the cardiac nurses on hypoglycaemia management and this will be repeated after the education intervention is complete. The second intervention will address timing of patient snacks and a pre and post audit will be instigated to evaluate any improvement in deficit areas.

Results: In September and October, 2010 in KACC, 40 patients had documented hypoglycaemic events. After the intervention phase we will conduct an observation to detect the number of hypoglycaemia in December 2010 and January 2011 to evaluate effectiveness of this intervention.

Conclusion: Cardiac diabetic nurse is effective in reducing the incidence of hypoglycaemic events in cardiac patients with type 2 DM at KACC through focused educational interventions.

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SHA 093. Prevalence of depression in adult Saudi patients with heart failure King Abdulaziz Medical City

Dalia Ali, Bassam Bdeir, Tara Conboy

King Abdulaziz Medical City-Cardiac Center, Riyadh, Saudi Arabia
E-mail address: alida@ngha.med.sa (D. Ali)

Background: Depression is a common co-morbid condition in patients with heart failure (HF). Most studies have been done in Western populations; there are currently no studies on depression prevalence in HF patients in Saudi Arabia.

Objectives: To explore the prevalence of depression in the adult Saudi population with HF attending the nurse led clinic at King Abdulaziz Medical City.

Methods: A retrospective study was carried out included 148 patients with completed electronic data, and patient health questionnaire (PHQ). All patients were attending the nurse led HF clinic at KAMC and had at least one visit from May 2010 to October 2010. Depression was assessed using the validated and Arabic version of the (PHQ).

Results: A total of 72% of the population were male, 32% of patients experienced varying degrees of depression: 67% with mild, 19% moderate, 8% moderate to severe and 6% with severe depression. Depression present in 54% of females and 24% of males.

Conclusion: The prevalence of depression in patients with HF who followed in nurse led clinic is 32.4% and it's more prevalent in females.

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SHA 094. Aldactone in patients with heart failure: Friend or foe?

May Al Khateeb, Tara Conboy, Bassam Bdeir

King Abdulaziz Medical City-Cardiac Center, Riyadh, Saudi Arabia
E-mail address: khateebm@ngha.med.sa (M.A. Khateeb)

Background: The guidelines recommend using spironolactone in moderate to severe heart failure (HF) and reduced left ventricular systolic function, if there is no contraindication. Spironolactone was shown to have a significant mortality and morbidity benefit in the placebo-controlled trials.

Objective: To study the frequency and causes of discontinuing spironolactone in Saudi HF patients in HF nurse-led clinic at King Abdulaziz Medical City (KAMC) Cardiac Center.

Method: A retrospective observational study which included all patients with HF enrolled from 2000 to 2010 who were prescribed spironolactone at any period and had at least one follow-up visit.

Results: A total of 565 patients (49% male, mean age 55.6 years) were included in this study. Spironolactone was discontinued in 277/565 patients (49%); 187/565 patients (33%) were discontinued secondary to improved ejection fraction (EF) and/or functional class; 83/565 patients (14.3%) were stopped due to worsening renal function and/or hyperkalemia; other side effects such as hypotension, gynecomastia affected the remaining < 1%.

Conclusion: Nearly half of Saudi HF patient discontinue Spironolactone within 2 years; the majority of the discontinuation is due to improved EF or/and functional class.

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SHA 095. Relationship between smoking status to mortality in patients with left ventricular dysfunction in Saudi population over 10 years

May Al Khateeb, Bassam Bdeir

King Abdulaziz Medical City-Cardiac Center, Riyadh, Saudi Arabia
E-mail address: khateebm@ngha.med.sa (M.A. Khateeb)

Background: Current smoking is a powerful independent predictor of morbidity and mortality in patients with left ventricular failure (LVF). Quitting smoking appears to have a substantial and early effect (within 2 years) on decreasing morbidity and mortality in patients with LVF, which is at least as effective as proven drug treatments for heart failure (HF).

Objective: To compare all cause mortality in HF patients who are current smokers or ex-smokers who quit smoking < 2 years (group 1) with ex-smokers who quit smoking > 2 years or never-smoked (group 2).

Method: This is retrospective observational study to evaluate the impact of the smoking status on all cause mortality for HF patients who enrolled in nurse led HF clinic at KACC in 2000 and 2001.

Results: There were 130 patients were enrolled between January 2000 and December 2001 mean age 55 years; 71.5% were male; total mortality 33/130.

In Group 1 mortality was 8/22 compared to group 2 mortality which was 25/108 patients univariate and multivariate analysis will be conducted.

Conclusion: All cause mortality is higher in HF patient who smoke.

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